

Work Order ID 105825

Tuesday, August 20, 2013 11:11:41 AM

105825

Page 1

Item ID: D2005-001

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Hose Ass'y .500dia x 14"

2

Start Date: 8/20/2013 Start Qty: 1.00

1

Cust Item ID:

Required Date: 8/30/2013 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: JMFDate: 8-8-20

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr
D2005-001	Rev D1

100 0.00

100

PURCHASING

Purchasing

Memo

0.00

CL130818.1 (2)

Purchasing

Issue P/O: 21021

Make per Drawing

Possible Supplier: Aero Component P/N: 124F002-8CR-0160

Material release note required

110 0.00

110

Receive & Inspect for Damage & Mat'l Certs

Packaging

Memo

0.00

G373 (2)

Packaging Ensure Material Release Note is attached

120 0.00

120

QC5- Inspect part completeness to step on W/O

DAS

QC

Quality Control

Memo

0.00

27

9-89

139.3

(2)

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS						
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>						
NCR No. _____	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>						
	Work Order Update <input type="checkbox"/>		Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data												
Equip/Tooling												
Operator												
Material												
Setup												
Other												
Process												
Supplier												
Training												
Unapproved												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 105825

Tuesday, August 20, 2013 11:11:41 AM

105825

Page 2

Item ID: D2005-001

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Hose Ass'y .500dia x 14"

Stop

NS2

Start Date: 8/20/2013 Start Qty: 1.00

1

Cust Item ID:

Required Date: 8/30/2013 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

130

Identify as per dwg & Stock Location:

0.00

130

Packaging

Memo

5/19/1

0.00

R93/S/3 (2)

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

13/9/3 (2)

Quality Control

AB09/3

NCR: Yes / No

DQA: Date:

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
				Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
				Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
				Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
				Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced			
Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure			
Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld			
Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled			
Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>				
Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>				
Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>				
Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset	<input type="checkbox"/>		<input type="checkbox"/>	Other			
Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>				
Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>				
Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>				

Picklist Print

Tuesday, August 20, 2013 11:12:12 AM

Page 1

Work Order ID: 105825

Parent Item: D2005-001

Parent Item Name: Hose Ass'y .500dia x 14"

Start Date: 8/20/2013

Required Date: 8/30/2013

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP: D00.09.2 | Re-formatted , fixed typoEC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2005-001P Hose Ass'y .500dia x 14"		Purchased		No			Each	0.0000		1		13/8/13 (2)	

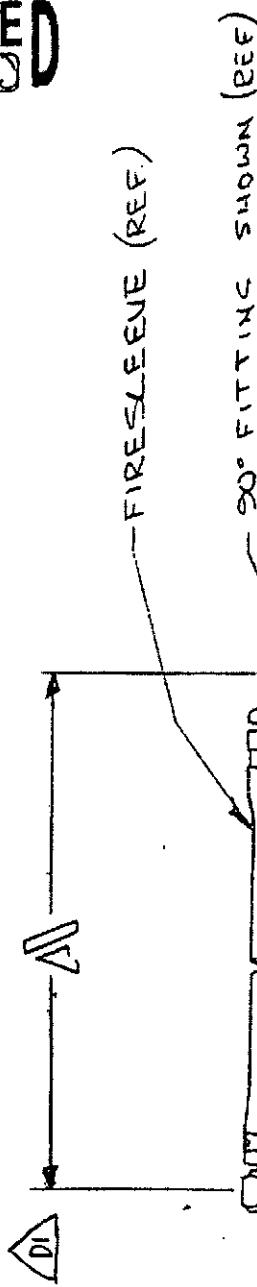
NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
NCR No. _____	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
	Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Other <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear	General									
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>					
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>					
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>					
	Crushed/Crimped <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>					
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>						
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>						
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>						
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>		Other <input type="checkbox"/>					
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>							
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>							
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>							

DARTRELEASED
97/06/23 BW

DESIGN BRADLEY	DRAWN BY BRADLEY	DART AEROSPACE LTD VICTORIA INTERNATIONAL AIRPORT, CANADA		
CHECKED <i>MW</i>	APPROVED BW	GROWING NO. D2005-001	REV D	SHEET 1 OF 1
DATE 97. 06. 23		TITLE HOSE ASSEMBLIES	SCALE	
C	REDRAWN 96.04.17	<i>Bradley</i>		
D	16.00 WAS 14.00 97. 06. 23.	<i>MW</i>		
D1	"A" DIM NOW TO CENTER OF NUT 02.06.05	<i>CPO</i>		

HOSE SPECIFICATION		
DART PART NO	VENDOR PART NO.	VENOR
D2005-001	124F002-BCE0160	STRATOFLEx
		16.00
D 2005 - 005	124F002-BCE-0360	STRATOFLEx
		36.00
D 2005 - 007	124F002-CCE-0240	STRATOFLEx
		24.00
D 2005-009	124F001-BCE-0360	STRATOFLEx
		30.00
D 2005-015	124F017D0360C046	STRATOFLEx
		36.00

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS																																																																																	
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																																																																																
NCR No. _____	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>																																																																																	
	Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																																																																																	
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																																																																													
Doc/Data																																																																																						
Equip/Tooling																																																																																						
Operator																																																																																						
Material																																																																																						
Setup																																																																																						
Other																																																																																						
Process																																																																																						
Supplier																																																																																						
Training																																																																																						
Unapproved																																																																																						
FAULT CATEGORY																																																																																						
Landing Gear			<table border="0"> <tr> <td colspan="2" style="text-align: center;">General</td> <td colspan="5"></td> </tr> <tr> <td>Bending</td> <td><input type="checkbox"/> Bend</td> <td>Grain</td> <td><input type="checkbox"/> Ovalized</td> <td>Pressure/Forced</td> </tr> <tr> <td>Centre Not Concentric to O/S</td> <td><input type="checkbox"/> BOM/Route</td> <td>Hardware</td> <td><input type="checkbox"/> Over/Under tolerance</td> <td>Temperature/Cure</td> </tr> <tr> <td>Cracks</td> <td><input type="checkbox"/> Broken/Damaged</td> <td>Inspection Incomplete</td> <td><input type="checkbox"/> Part Incorrect</td> <td>Weld</td> </tr> <tr> <td>Crushed/Crimped</td> <td><input type="checkbox"/> Burrs</td> <td>Instructions Incomplete/Unclear</td> <td><input type="checkbox"/> Part Lost/Missing</td> <td>Wrong Stock Pulled</td> </tr> <tr> <td>Cuffs</td> <td><input type="checkbox"/> Contamination</td> <td>Maintenance</td> <td><input type="checkbox"/> Part Moved</td> <td></td> </tr> <tr> <td>Heat Treat</td> <td><input type="checkbox"/> Countersink</td> <td>Mislabeled</td> <td><input type="checkbox"/> Positioned Wrong</td> <td></td> </tr> <tr> <td>Inspection Strip in Tube</td> <td><input type="checkbox"/> Cut Too Short</td> <td>Misread</td> <td><input type="checkbox"/> Power Loss/Surge</td> <td></td> </tr> <tr> <td>Ripples in Bend</td> <td><input type="checkbox"/> Drill Holes</td> <td>Offset</td> <td></td> <td></td> </tr> <tr> <td>Torque Waves in Extrusion</td> <td><input type="checkbox"/> Drawing</td> <td>Out of Calibration</td> <td></td> <td></td> </tr> <tr> <td>Turning Sequence</td> <td><input type="checkbox"/> Finish</td> <td>Out of Sequence</td> <td></td> <td></td> </tr> <tr> <td>Wave/Twist in Tube</td> <td><input type="checkbox"/> Folio</td> <td>Outside Dimensions</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>							General							Bending	<input type="checkbox"/> Bend	Grain	<input type="checkbox"/> Ovalized	Pressure/Forced	Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	Hardware	<input type="checkbox"/> Over/Under tolerance	Temperature/Cure	Cracks	<input type="checkbox"/> Broken/Damaged	Inspection Incomplete	<input type="checkbox"/> Part Incorrect	Weld	Crushed/Crimped	<input type="checkbox"/> Burrs	Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	Wrong Stock Pulled	Cuffs	<input type="checkbox"/> Contamination	Maintenance	<input type="checkbox"/> Part Moved		Heat Treat	<input type="checkbox"/> Countersink	Mislabeled	<input type="checkbox"/> Positioned Wrong		Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	Misread	<input type="checkbox"/> Power Loss/Surge		Ripples in Bend	<input type="checkbox"/> Drill Holes	Offset			Torque Waves in Extrusion	<input type="checkbox"/> Drawing	Out of Calibration			Turning Sequence	<input type="checkbox"/> Finish	Out of Sequence			Wave/Twist in Tube	<input type="checkbox"/> Folio	Outside Dimensions																	
			General																																																																																			
			Bending	<input type="checkbox"/> Bend	Grain	<input type="checkbox"/> Ovalized	Pressure/Forced																																																																															
			Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	Hardware	<input type="checkbox"/> Over/Under tolerance	Temperature/Cure																																																																															
			Cracks	<input type="checkbox"/> Broken/Damaged	Inspection Incomplete	<input type="checkbox"/> Part Incorrect	Weld																																																																															
			Crushed/Crimped	<input type="checkbox"/> Burrs	Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	Wrong Stock Pulled																																																																															
			Cuffs	<input type="checkbox"/> Contamination	Maintenance	<input type="checkbox"/> Part Moved																																																																																
			Heat Treat	<input type="checkbox"/> Countersink	Mislabeled	<input type="checkbox"/> Positioned Wrong																																																																																
			Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	Misread	<input type="checkbox"/> Power Loss/Surge																																																																																
			Ripples in Bend	<input type="checkbox"/> Drill Holes	Offset																																																																																	
			Torque Waves in Extrusion	<input type="checkbox"/> Drawing	Out of Calibration																																																																																	
			Turning Sequence	<input type="checkbox"/> Finish	Out of Sequence																																																																																	
			Wave/Twist in Tube	<input type="checkbox"/> Folio	Outside Dimensions																																																																																	



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO21021

Purchase Order Date 8/21/2013
PO Print Date 8/21/2013

Page Number 1 of 3

Order From :
AVIALL
PO BOX 842275

DALLAS, TX 75284-2275
USA

VU-AVI003

Ship To : DART AEROSPACE LTD
1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAXED
FAX/632820

Contact Name		Buyer	Chantal Lavoie
Vendor Phone	905-676-1695	Customer POID	
Ship To Contact		Customer Tax #	10127-2607
Ship To Phone		Terms	Net 30
Ship Via:	FedEx PI collect	Currency	USD
Ship Acct:		FOB	FCA - (Free Carrier)

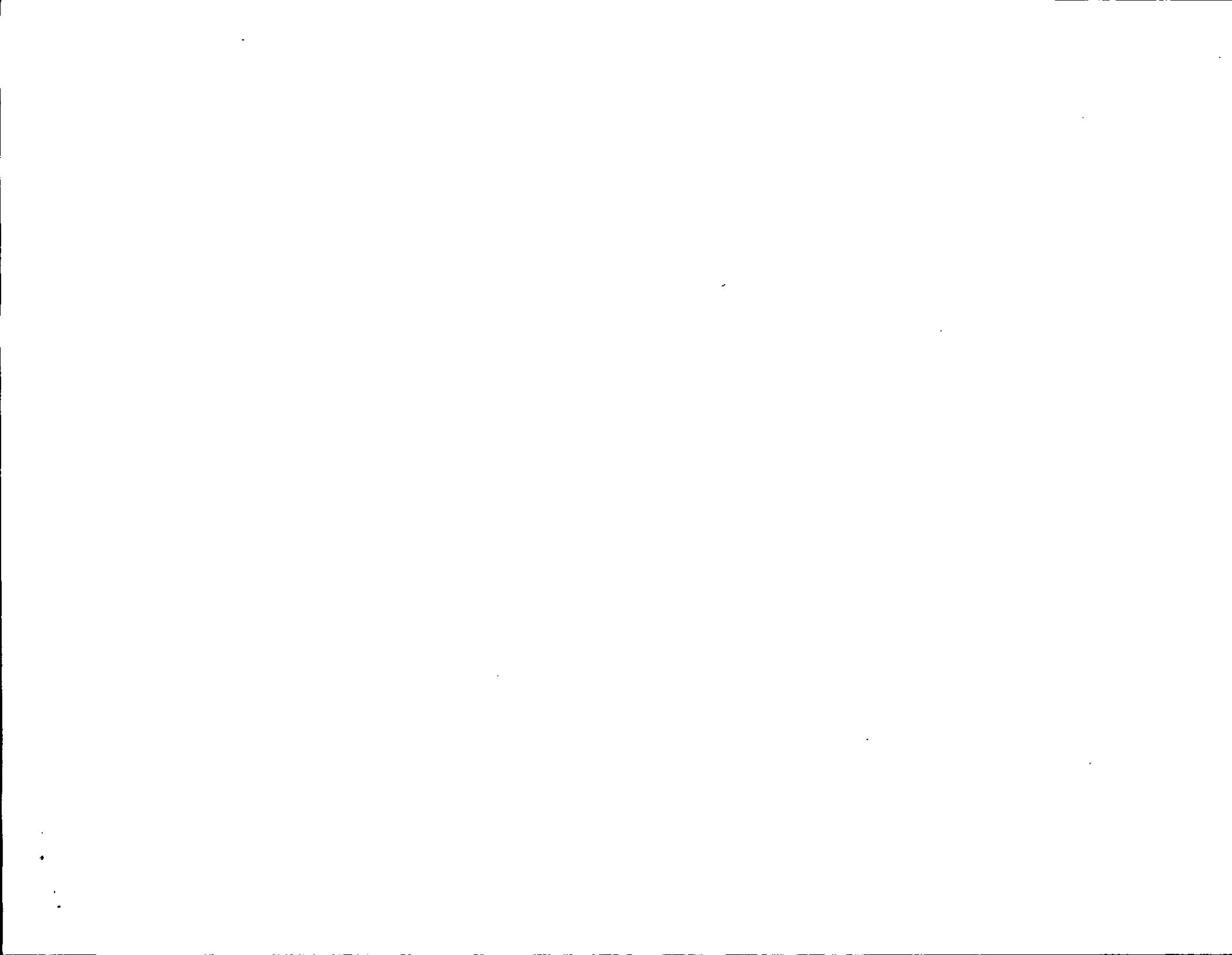
Line Nbr	Reference Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	CD	Req Qty/ Unit of Measure	PO Unit Price	E
1	156001-8D-0102	HOSE ASS'Y	8/28/2013 Yes 8/28/2013	✓	1.00 Each	\$81.19	
	AS PER DWG E4670 REV. A 105719					Sp 13-8-23	

Line Total:

2	D2005-001P	Hose Ass'y .500dia x 14"	8/28/2013 Yes 8/28/2013	2.00 Each	\$146.61
	AS PER DWG D2005 REV. D B105825 STRATOFLEX P/N: 124F002-8CR-0160				

Line Total:

Note:





PACKING LIST



CUSTOMER P.O.: 21021

ORDER NUMBER: 0013851600- 80560
ORDER DATE: 08/21/13

SHIP 80560

PAGE: 1
DATE: 08/29/13
TIME: 16:39
EMP#: 25481
ORD TYP: RG 241
CURRENCY: USD

SHIP VIA: FED EX - COLLECT

B 032028
 I DART AEROSPACE LTD
 L 1270 ABERDEEN STREET
 HAWKESBURY ON K6A 1K7
 T CANADA
 O

S H DART AEROSPACE LTD
 P 1270 ABERDEEN STREET
 HAWKESBURY ON K6A 1K7
 T CANADA
 O

S 41270
 H AVIALL DALLAS HOSE SHOP
 P AVIALL
 HOSE SHOP
 F 2755 REGENT BLVD
 R DFW AIRPORT TX 75261-9048
 M U.S.A.

LINE	MFG	ITEM DESCRIPTION	ORDER QUANTITY	SHIP QUANTITY	BACK ORDER	UOM	LIST PRICE	CUSTOMER PRICE	EXTENDED CUSTOMER PRICE
PLEASE SHIP FEDEX P1 ON CUSTOMER ACCOUNT NUMBER 1517-9324-0, AWB# MUST REFERENCE THE PURCHASE ORDER NUMBER, SHIP TO THE ATTN OF CHANTAL 613-632-9577									
2	1S	124F002-8CR0160 HOSE: MED PRESSURE, PTFE REIN ST, REF: Schedule B: 3917.39.0002	2	2	0 EA	ECCN: 9A991.d	146.61	146.6100	293.22
LOT 51255525 EA Country of Origin: U.S.A.									
2									

*** The recipient of these goods agrees to comply with all export regulations
 *** governing the transfer, sale, lease, or use of these goods. Diversion
 *** contrary to U.S Law is prohibited.

Aviall is not providing OEM parts. Aviall is an authorized Stratoflex distributor providing TSO assemblies. Numbers referenced per customer requirements are for customer reference ONLY and are in no way intended to be represented as OEM parts. Any reference to an OEM part number does not authorize or reflect installation authority for this part. The installation authority is provided by the mechanic installing this product in accordance with FAR Part 43.

PARTS TOTAL	293.22
AOC TOTAL	0.00
FREIGHT	0.00

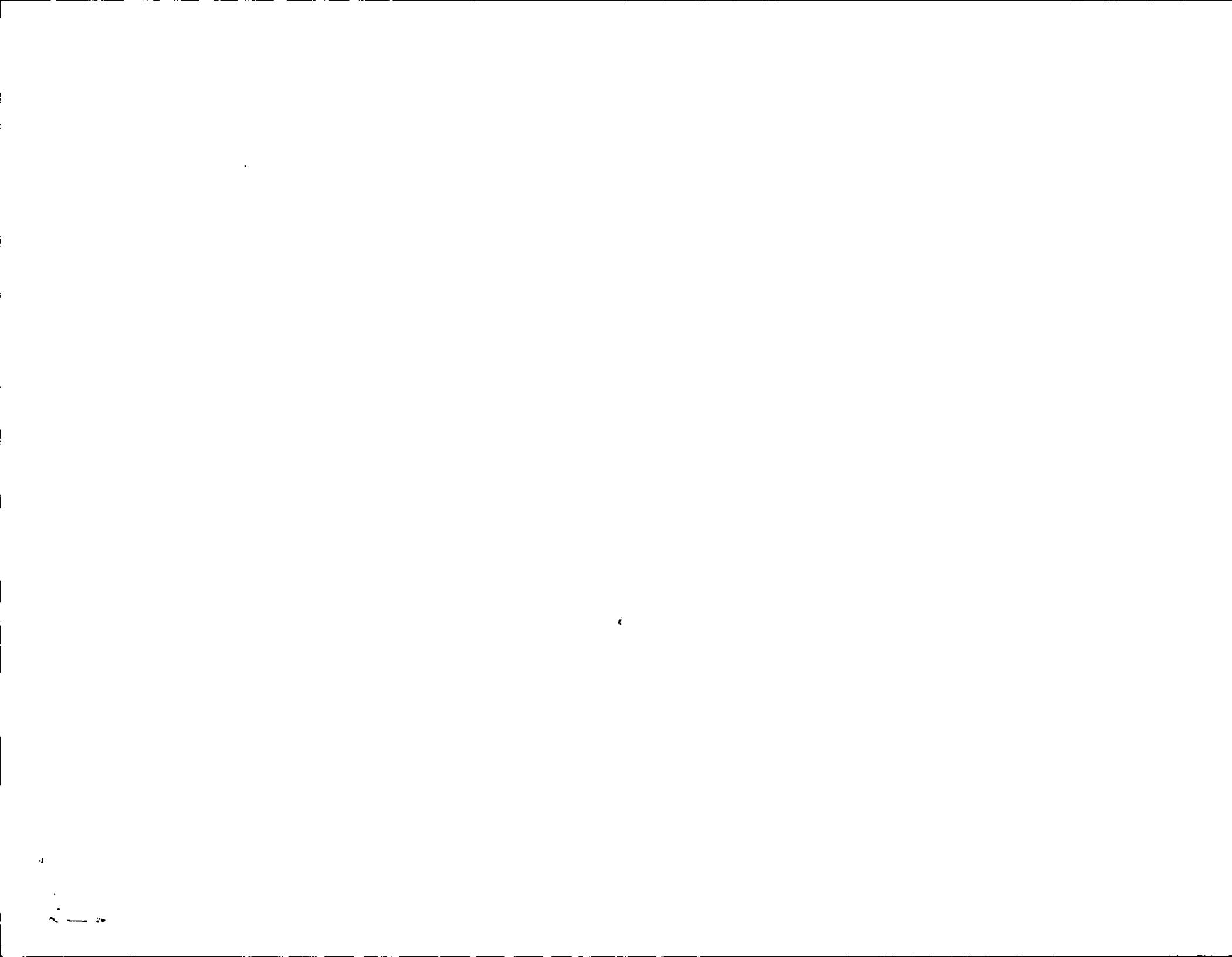
CERTIFICATE OF CONFORMANCE
 It is hereby certified that Aviall Services, Inc., is an approved distributor and meets all requirements of ISO9001, AS9100, AS9120 and AC 00-56 at 2750 Regent Blvd. DFW Airport, Texas. The products, articles or parts referenced on this document are in new or overhauled condition and were purchased from an approved source (FAA, EASA, TCCA, Mil Spec or Commercial). The Original Manufacturers' Certifications are maintained on file at our central office location, and copies are available upon request or at Aviall.com. For overhauled or repaired products, articles or parts, the original FAA 8130-3 / EASA Form 1 (Return to Service) or Yellow Tag, from the FAA/JAA/EASA approved Air Agency are attached to the component.
 Rev 1.13

DISCOUNT TERMS APPLY ONLY TO SUB TOTAL. ALL RETURNED MERCHANDISE SUBJECT TO HANDLING FEE.
 THIS IS TO CERTIFY THAT AVIALL HAS COMPLIED WITH THE PROVISIONS OF THE FAIR LABOR STANDARDS ACT OF 1938 AMENDED.

JR Hofmann, Director, Quality Assurance & Training

Shipped Date

CUSTOMER COPY





PACKING LIST



CUSTOMER P.O.: 21021

ORDER NUMBER: 0013851600- 80560
ORDER DATE: 08/21/13

SHIP 80560

PAGE: 2
DATE: 08/29/13
TIME: 16:39
EMP#: 25481
ORD TYP: RG 241
CURRENCY: USD

B 032028
 I DART AEROSPACE LTD
 L 1270 ABERDEEN STREET
 HAWKESBURY ON K6A 1K7
 T CANADA
 O

S H DART AEROSPACE LTD
 I P 1270 ABERDEEN STREET
 HAWKESBURY ON K6A 1K7
 T CANADA
 O

S 41270
 H AVIALL DALLAS HOSE SHOP
 I P AVIALL
 HOSE SHOP
 F 2755 REGENT BLVD
 R O DFW AIRPORT TX 75261-9048
 M U.S.A.

SHIP VIA: FED EX - COLLECT

LINE	MFG	ITEM DESCRIPTION	ORDER QUANTITY	SHIP QUANTITY	BACK ORDER	UOM	LIST PRICE	CUSTOMER PRICE	EXTENDED CUSTOMER PRICE
							FUEL SURCHARGE		0.00
							TAXES		0.00
							TOTAL		293.22

Currency: United States Dollar

CERTIFICATE OF CONFORMANCE
 It is hereby certified that Aviall Services, Inc., is an approved distributor and meets all requirements of ISO9001, AS9100, AS9120 and AC 00-56 at 2750 Regent Blvd. DFW Airport, Texas. The products, articles or parts referenced on this document are in new or overhauled condition and were purchased from an approved source (FAA, EASA, TCCA, MIL Spec or Commercial). The Original Manufacturers' Certifications are maintained on file at our central office location, and copies are available upon request or at Aviall.com. For overhauled or repaired products, articles or parts, the original FAA 8130-3 / EASA Form 1 (Return to Service) or Yellow Tag, from the FAA/JAA/EASA approved Air Agency are attached to the component.

DISCOUNT TERMS APPLY ONLY TO SUB TOTAL. ALL RETURNED MERCHANDISE SUBJECT TO HANDLING FEE.
 THIS IS TO CERTIFY THAT AVIALL HAS COMPLIED WITH THE PROVISIONS OF THE FAIR LABOR STANDARDS ACT OF 1938 AMENDED.





Hose Shop 2755 Regent Blvd. DFW Airport 75261

Phone 972-586-1380 Fax 972-586-1381 www.aviall.com

TSO CERTIFICATION

It is hereby certified that (A) The parts and/or materials reflected herein were produced under Federal Aviation Administration approved manufacturing and quality control system/methods as set forth in the FAA issued technical standard order authorizations (TSOA) issued to Stratoflex and (B) such part and/or materials are new and are in condition for safe operation.

Customer Order Number: 13851600

1. 124F002-8CR0160

QTY. 2

Signed: _____

Date: 08-29-2013

"Aviall is not providing OEM parts. Aviall is an authorized Stratoflex distributor providing TSO assemblies. Numbers referenced per customer requirements are for customer reference ONLY and are in no way intended to be represented as OEM parts. Any reference to an OEM part number does not authorize or reflect installation authority for this part. The installation authority is provided by the mechanic installing this product in accordance with FAR Part 43".

If applicable, satisfactory compliance with the conditions and tests required for TSO approval indicates the hose assembly has met the minimum performance standards as stated in the TSO. Furthermore, it is the responsibility of the installer to determine the installation eligibility and that it will not cause the hose assembly to be subjected to conditions in excess of those for which it has been approved.

FORM# CERT -001

